Docket No. <u>979-102</u>

Group Art Unit: 3651

Filed

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mougin Thierry 10/518,327 rial No. : January 21, 2005

Examiner: Tran

For

METHOD FOR DIAGNOSING MALFUNCTION OF APPARATUS DELIVERING

GOODS AND SERVICES AGAINST PAYMENT

AMENDMENT FEE TRANSMITTAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

[]

Transmitted	herewith	is an	Amendme	nt for tl	ne above	-identified	application.

[] The additional fee has been calculated as shown below:

No additional fee is required.

CLAIMS AS AMENDED

	Claims Remaining After Amendment		Highest No. Covered by Previous Payments	Present Extra	Rate	Additional Fee
Total						
Claims*	10	-	20	=0	x \$50.00	\$
Independent Claims	2		3	=0	x \$200.00	\$
Multiple Dependent Claim(s)	(If claims added by amendment include Multiple Dependent Claim(s) and there was no Multiple Dependent Claim(s) in application before amendment add \$260.00 to additional fee.)					\$ \$
filed		duced Fee	ity" Status Under s Under 37 CFR	_		\$

Includes all independent and single dependent claims and all claims referred to in multiple dependent claims. See 37 C.F.R. § 1.75(c).

[]	Charge fee to Deposit Account No. 19-2825. Order No A DUPLICATE COPY OF THIS SHEET IS ATTACHED.			
[X]	The Commissioner is hereby authorized to charge any additional fees which may be required for this amendment, or credit any overpayment to Deposit Account No.19-2825. Order No. 979-102.			
[]	Page(s) of substitute Sequence Listing			
[]	Computer disk(s) containing substitute Sequence Listing			
[]	Statement under 37 C.F.R. § 1.825(b) that the computer and paper copies of the substitute Sequence Listing are the same.			
[]	A check in the amount of \$ to cover the filing fee is attached.			
	Respectfully submitted,			
	SOFER & HAROUN L.L.P.			
Dated:]	March 17, 2008 By: Joseph Sofer			
	Registration No. 34,438			
Mailing	Address:			

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.

: Mougin Thierry 10/518,327

Filed

June 26, 2005

For

METHOD FOR DIAGNOSING MALFUNCTION OF APPARATUS DELIVERING

GOODS AND SERVICES AGAINST PAYMENT

CERTIFICATE OF MAILING (37 C.F.R. 1.8a)

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

I hereby certify that the attached Amendment, Amendment Transmittal, Petition for Three-Month Extension of Time, Check for \$ 1,050.00, Certificate of Mailing, and Return Postcard, along with any paper(s) referred to as being attached or enclosed and this Certificate of Mailing are being deposited with the United States Postal Service on the date shown below with sufficient postage as first-class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450 Alexandria, V.A. 22313-1450.

Respectfully submitted,

SOFER & HAROUN, L.L.P.

Valentina Papraniku

Date: March 17, 2008

Mailing Address:

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